

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MAINE REPUBLICAN PARTY

ADDRESS (number and street) ▼

9 HIGGINS STREET

☐ Check if different than previously reported. (ACC)

AUGUSTA

ME

04330

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00003111

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

05

01

2016

05

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer BEN LOMBARD

Signature of Treasurer

BEN LOMBARD

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

09

21

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MAINE REPUBLICAN PARTY

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 05 / 01 / 2016

To:

 M M / D D / Y Y Y Y  
 05 / 31 / 2016

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, 2016   |                         | 84989.22                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 150486.63               |                                   |
| (c) Total Receipts (from Line 19) .....  | 79215.79                | 319428.77                         |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 229702.42               | 404417.99                         |
| 7. Total Disbursements (from Line 31) .....  | 98594.37                | 273309.94                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 131108.05               | 131108.05                         |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**MAINE REPUBLICAN PARTY**

Report Covering the Period:

From:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 01  | / | 2016    |

To:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 31  | / | 2016    |

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

20964.45

127399.27

(ii) Unitemized .....

54165.00

131242.78

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

75129.45

258642.05

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

3586.34

6472.34

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

78715.79

265114.39

## 12. Transfers From Affiliated/Other

Party Committees.....

500.00

500.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

53814.38

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

53814.38

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ►

79215.79

319428.77

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

79215.79

265614.39

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 7468.50                       | 40204.19                          |
| (ii) Non-Federal Share.....  | 19204.72                      | 103382.12                         |
| (b) Other Federal Operating Expenditures .....   | 71019.15                      | 110992.32                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 97692.37                      | 254578.63                         |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 152.00                        | 296.18                            |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 750.00                        | 750.00                            |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 902.00                        | 1046.18                           |
| 29. Other Disbursements .....  | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 17685.13                          |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 17685.13                          |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 98594.37                      | 273309.94                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 79389.65                      | 169927.82                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 78715.79                      | 265114.39                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 902.00                        | 1046.18                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 77813.79                      | 264068.21                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 78487.65                      | 151196.51                         |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 78487.65                      | 151196.51                         |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 90

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. TROY ADAMS**

Mailing Address 200 HIGH STREET

City  
ELLSWORTHState  
MEZip Code  
04605FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAWKINS, INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

Transaction ID : SA11AI.20049

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MRS. MARY ALLEY**

Mailing Address 69 LAMOINE BEACH ROAD

City  
LAMOINEState  
MEZip Code  
04605FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

Transaction ID : SA11AI.18349

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MR. KRISTOPHER ANDERSON**

Mailing Address 42 CAPT. SPEAR DRIVE

City  
PHIPPSBURGState  
MEZip Code  
04562FEC ID number of contributing  
federal political committee.

C

Name of Employer

BATH IRON WORKS ENGINEER

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

Transaction ID : SA11AI.19558

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

240.00

TOTAL This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

### A. BRETT BABER

Mailing Address 29 SILVER RIDGE ROAD

City State Zip Code  
VEAZIE ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LANHAM BLACKWELL & BABER, P.A.

Occupation  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19900

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. BRETT BABER

Mailing Address 29 SILVER RIDGE ROAD

City State Zip Code  
VEAZIE ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LANHAM BLACKWELL & BABER, P.A.

Occupation  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19901

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. MRS. DIANE BAILEY

Mailing Address 54 BLACK SWAN DRIVE

City State Zip Code  
SOUTH BERWICK ME 03908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19404

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MRS. DIANE BAILEY**

Mailing Address 54 BLACK SWAN DRIVE

City State Zip Code  
 SOUTH BERWICK ME 03908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19405

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MRS. DIANE BAILEY**

Mailing Address 54 BLACK SWAN DRIVE

City State Zip Code  
 SOUTH BERWICK ME 03908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19406

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MRS. DIANE BAILEY**

Mailing Address 54 BLACK SWAN DRIVE

City State Zip Code  
 SOUTH BERWICK ME 03908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19407

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

170.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 90

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MRS. DIANE BAILEY**

Mailing Address 54 BLACK SWAN DRIVE

City

SOUTH BERWICK

State

ME

Zip Code

03908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

418.25

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : SA11AI.19408**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SENATOR LINDA BAKER**

Mailing Address 1 HOMEPLACE

City

TOPSHAM

State

ME

Zip Code

04086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

STATE SENATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : SA11AI.19412**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SENATOR LINDA BAKER**

Mailing Address 1 HOMEPLACE

City

TOPSHAM

State

ME

Zip Code

04086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

STATE SENATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

290.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : SA11AI.19413**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

130.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. SENATOR LINDA BAKER**

Mailing Address 1 HOMEPLACE

City  
TOPSHAM

State Zip Code  
ME 04086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

STATE SENATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19414

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LINDA BEAN**

Mailing Address PO BOX 239

City  
PORT CLYDE

State Zip Code  
ME 04855

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LINDA BEAN PERFECT MAINE LOBSTER

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18920

Amount of Each Receipt this Period

50.00

☐ Memo Item

TO BE REFUNDED

Full Name (Last, First, Middle Initial)

**C. LINDA BEAN**

Mailing Address PO BOX 239

City  
PORT CLYDE

State Zip Code  
ME 04855

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LINDA BEAN PERFECT MAINE LOBSTER

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10070.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18921

Amount of Each Receipt this Period

20.00

☐ Memo Item

TO BE REFUNDED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. LINDA BEAN**

Mailing Address PO BOX 239

City

PORT CLYDE

State

ME

Zip Code

04855

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LINDA BEAN PERFECT MAINE LOBSTER

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10130.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18922

Amount of Each Receipt this Period

60.00

☐ Memo Item

TO BE REFUNDED

Full Name (Last, First, Middle Initial)

**B. LINDA BEAN**

Mailing Address PO BOX 239

City

PORT CLYDE

State

ME

Zip Code

04855

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LINDA BEAN PERFECT MAINE LOBSTER

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10155.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18923

Amount of Each Receipt this Period

25.00

☐ Memo Item

TO BE REFUNDED

Full Name (Last, First, Middle Initial)

**C. LINDA BEAN**

Mailing Address PO BOX 239

City

PORT CLYDE

State

ME

Zip Code

04855

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LINDA BEAN PERFECT MAINE LOBSTER

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18924

Amount of Each Receipt this Period

50.00

☐ Memo Item

TO BE REFUNDED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 90

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. LINDA BEAN

Mailing Address PO BOX 239

City State Zip Code  
PORT CLYDE ME 04855

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LINDA BEAN PERFECT MAINE LOBSTER

Occupation  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.18925

Amount of Each Receipt this Period

35.00

☐ Memo Item

TO BE REFUNDED

Full Name (Last, First, Middle Initial)

B. JENNIFER BERRY

Mailing Address 157 GAMAGE AVENUE

City State Zip Code  
AUBURN ME 04210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T-MOBILE

Occupation  
HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.18589

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR. CHRISTIAN BISHOP

Mailing Address 23 PATTENWOODS LANE

City State Zip Code  
LITCHFIELD ME 04350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CASCO BAY WEALTH ADVISORS

Occupation  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.18600

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. PETER BOHMAN**

Mailing Address 53 PLOSSAY SHORE

City State Zip Code  
 NORTH MONMOUT ME 04265

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11Al.18657

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. PETER BOHMAN**

Mailing Address 53 PLOSSAY SHORE

City State Zip Code  
 NORTH MONMOUT ME 04265

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2016

Transaction ID : SA11Al.19136

Amount of Each Receipt this Period

8.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHERYL BOLDUC**

Mailing Address 68 OUTLET COVE ROAD

City State Zip Code  
 WINDHAM ME 04062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SO ME SPECIALTIES

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2016

Transaction ID : SA11Al.19171

Amount of Each Receipt this Period

200.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

258.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 90

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MRS. LUCINDA BRAKEY**

Mailing Address 115 DEERFIELD ROAD

|                |       |          |
|----------------|-------|----------|
| City           | State | Zip Code |
| NEW GLOUCESTER | ME    | 04260    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRAKEY ENERGY, INC.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 05 |   |   | 02 |   |   | 2016 |   |   |   |

Transaction ID : SA11AI.18489

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MRS. HOLLY BUONAIUTO**

Mailing Address 2 PLEASANT VALLEY AVENUE

|                |       |          |
|----------------|-------|----------|
| City           | State | Zip Code |
| CAPE ELIZABETH | ME    | 04107    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 05 |   |   | 02 |   |   | 2016 |   |   |   |

Transaction ID : SA11AI.19708

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MR. ROBERT CHADBOURNE**

Mailing Address PO BOX 1600

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| BETHEL | ME    | 04217    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

P.H. CHADBOURNE

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 05 |   |   | 02 |   |   | 2016 |   |   |   |

Transaction ID : SA11AI.18679

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

3600.00

TOTAL This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. NANCY COLWELL**

Mailing Address 14 HIDDEN ACRES LANE

City

SURRY

State

ME

Zip Code

04684

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATLANTIC BOAT COMPANY

Occupation

BOAT STORAGE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19889

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NANCY COLWELL**

Mailing Address 14 HIDDEN ACRES LANE

City

SURRY

State

ME

Zip Code

04684

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATLANTIC BOAT COMPANY

Occupation

BOAT STORAGE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19890

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMAS H. L. CURTIS**

Mailing Address PO BOX 613

City

NORWAY

State

ME

Zip Code

04268

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2016

Transaction ID : SA11AI.18646

Amount of Each Receipt this Period

8.25

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

88.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. THOMAS H. L. CURTIS**

Mailing Address PO BOX 613

City  
NORWAY

State Zip Code  
ME 04268

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1368.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : SA11AI.18996

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMAS H. L. CURTIS**

Mailing Address PO BOX 613

City  
NORWAY

State Zip Code  
ME 04268

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1376.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2016

Transaction ID : SA11AI.19516

Amount of Each Receipt this Period

8.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HONORABLE DOUGLAS DAMON**

Mailing Address 59 17TH STREET

City  
BANGOR

State Zip Code  
ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REALTY OF MAINE

Occupation

REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.20094

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1068.25



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. CAROL DENNISON**

Mailing Address PO BOX 309

City

LUBEC

State

ME

Zip Code

04652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOWN OF LUBEC

Occupation

CHAIR OF THE SELECTBOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19601

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAROL DENNISON**

Mailing Address PO BOX 309

City

LUBEC

State

ME

Zip Code

04652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOWN OF LUBEC

Occupation

CHAIR OF THE SELECTBOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19602

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MRS. ELIZA G DENOEU**

Mailing Address 153 MAYFLOWER HEIGHTS DRIVE

City

OAKLAND

State

ME

Zip Code

04963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FUNDRAISER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18534

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MRS. ELIZA G DENOEU**

Mailing Address 153 MAYFLOWER HEIGHTS DRIVE

City State Zip Code  
 OAKLAND ME 04963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FUNDRAISER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 02 2016

Transaction ID : SA11Al.19207

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MRS. JOSEPHINE DETMER**

Mailing Address 14 SPRUCE LANE

City State Zip Code  
 CUMBERLAND FORESIDE ME 04110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WAYNEFLETE SCHOOL

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 02 2016

Transaction ID : SA11Al.18516

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MRS. JEAN DONOVAN**

Mailing Address 182 DOUGLAS HWY

City State Zip Code  
 LAMOINE ME 04605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ELLSWORTH GIANT SUB

Occupation

RESTAURANT MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 02 2016

Transaction ID : SA11Al.18678

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

545.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. DANA L DOW**

Mailing Address 30 KALERS POND ROAD

City

WALDOBORO

State

ME

Zip Code

04572

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DOW FURNITURE COMPANY

Occupation

PRESIDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11Al.18521

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. GORDON DRAPER**

Mailing Address 1225 MAIN STREET

City

BOWDOIN

State

ME

Zip Code

04287

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11Al.18682

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MR. GORDON DRAPER**

Mailing Address 1225 MAIN STREET

City

BOWDOIN

State

ME

Zip Code

04287

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.00

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11Al.18683

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. GORDON DRAPER**

Mailing Address 1225 MAIN STREET

City

BOWDOIN

State

ME

Zip Code

04287

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

718.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18684

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. GORDON DRAPER**

Mailing Address 1225 MAIN STREET

City

BOWDOIN

State

ME

Zip Code

04287

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18685

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MRS. LESLIE DUBOIS**

Mailing Address 588 MAIN STREET

City

LEWISTON

State

ME

Zip Code

04240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MICHAEL DUBOIS PA

Occupation

OFFICE MANAGER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18714

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 90

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MRS. LESLIE DUBOIS**

Mailing Address 588 MAIN STREET

City

LEWISTON

State

ME

Zip Code

04240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MICHAEL DUBOIS PA

Occupation

OFFICE MANAGER

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : SA11Al.18715**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MRS. LESLIE DUBOIS**

Mailing Address 588 MAIN STREET

City

LEWISTON

State

ME

Zip Code

04240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MICHAEL DUBOIS PA

Occupation

OFFICE MANAGER

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

425.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : SA11Al.18716**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILLIAM DUNTON**

Mailing Address 538 WISCASSET RD

City

BOOTHBAY

State

ME

Zip Code

04537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : SA11Al.19062**

Amount of Each Receipt this Period

120.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

240.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. WILLIAM DUNTON**

Mailing Address 538 WISCASSET RD

City

BOOTHBAY

State

ME

Zip Code

04537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19063

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MS. JINGER DURYEA**

Mailing Address 255 DUNN ROAD

City

NORWAY

State

ME

Zip Code

04268

FEC ID number of contributing  
federal political committee.

C

Name of Employer

C.N. BROWN CO.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19068

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MS. JINGER DURYEA**

Mailing Address 255 DUNN ROAD

City

NORWAY

State

ME

Zip Code

04268

FEC ID number of contributing  
federal political committee.

C

Name of Employer

C.N. BROWN CO.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19069

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. LORETTA DYER**

Mailing Address 15 RIVERBEND DRIVE

City State Zip Code  
YARMOUTH ME 04096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18669

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LORETTA DYER**

Mailing Address 15 RIVERBEND DRIVE

City State Zip Code  
YARMOUTH ME 04096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Transaction ID : SA11AI.18698

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DANA EDWARDS**

Mailing Address PO BOX 692

City State Zip Code  
HAMPDEN ME 04444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

RETAIL GROCER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18709

Amount of Each Receipt this Period

360.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

440.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. NICHIE FARNHAM**

Mailing Address 11 FAIRMOUNT PARK WEST

City State Zip Code  
 BANGOR ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE AIR NATIONAL GUARD

Occupation

PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.18855

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. NICHIE FARNHAM**

Mailing Address 11 FAIRMOUNT PARK WEST

City State Zip Code  
 BANGOR ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE AIR NATIONAL GUARD

Occupation

PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.18856

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. NICHIE FARNHAM**

Mailing Address 11 FAIRMOUNT PARK WEST

City State Zip Code  
 BANGOR ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE AIR NATIONAL GUARD

Occupation

PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.18857

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

### A. NICHIE FARNHAM

Mailing Address 11 FAIRMOUNT PARK WEST

City State Zip Code  
BANGOR ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAINE AIR NATIONAL GUARD

Occupation  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18858

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. MRS. MARGARET FENDERSON

Mailing Address 17 STONY RIDGE ROAD

City State Zip Code  
CUMBERLAND FORESIDE ME 04110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18691

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. DONNA FLANAGAN

Mailing Address PO BOX 238

City State Zip Code  
LEBANON ME 04027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18674

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

235.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. MRS. NANCY FORD

Mailing Address 128 BALD HILL ROAD

City State Zip Code  
WELLS ME 04090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18546

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS. NANCY FORD

Mailing Address 128 BALD HILL ROAD

City State Zip Code  
WELLS ME 04090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18547

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR. CHARLIE GAUNCE

Mailing Address 21 EATON DRIVE

City State Zip Code  
WATERVILLE ME 04901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CENTRAL MAINE MOTORS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 23 / 2016

Transaction ID : SA11AI.18751

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

485.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. HONORABLE JAYNE GILES**

Mailing Address 15 TOZIER STREET

City  
BELFAST

State Zip Code  
ME 04915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENQUIS

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.20298

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HONORABLE JAYNE GILES**

Mailing Address 15 TOZIER STREET

City  
BELFAST

State Zip Code  
ME 04915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENQUIS

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.20299

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Rep. PHYLLIS GINZLER**

Mailing Address 10 BLUE JAY LANE

City  
BRIDGTON

State Zip Code  
ME 04009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.20270

Amount of Each Receipt this Period

40.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. STACEY GUERIN

Mailing Address 79 PHILLIPS RD

City State Zip Code  
GLENBURN ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE HOUSE OF REPRESENTATIVES

Occupation

LEGISLATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.19654

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STACEY GUERIN

Mailing Address 79 PHILLIPS RD

City State Zip Code  
GLENBURN ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE HOUSE OF REPRESENTATIVES

Occupation

LEGISLATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.19655

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STACEY GUERIN

Mailing Address 79 PHILLIPS RD

City State Zip Code  
GLENBURN ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE HOUSE OF REPRESENTATIVES

Occupation

LEGISLATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.19656

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

140.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. STACEY GUERIN**

Mailing Address 79 PHILLIPS RD

City State Zip Code  
 GLENBURN ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE HOUSE OF REPRESENTATIVES

Occupation

LEGISLATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19657

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STACEY GUERIN**

Mailing Address 79 PHILLIPS RD

City State Zip Code  
 GLENBURN ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE HOUSE OF REPRESENTATIVES

Occupation

LEGISLATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19658

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MS. GAIL GUSTIN**

Mailing Address 21 EAST ROAD

City State Zip Code  
 WALES ME 04280

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19664

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 90

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**A. MS. BETH HANSEN**

Mailing Address 620 E BROAD STREET, SUITE 2016

City State Zip Code  
 COLUMBUS OH 43215

FEC ID number of contributing federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2016

Transaction ID : SA11AI.18745

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROBERT HARMON**

Mailing Address PO BOX 490

City State Zip Code  
 RAYMOND ME 04071

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2016

Transaction ID : SA11AI.19294

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RYAN HARMON**

Mailing Address 2241 NORTH PALERMO ROAD

City State Zip Code  
 PALERMO ME 04354

FEC ID number of contributing federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19452

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

2360.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MS. BARBARA HARVEY**

Mailing Address P.O. BOX 8123

617 FOREST AVE. APT. 2

City

PORTLAND

State

ME

Zip Code

04102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.19751

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MS. BARBARA HARVEY**

Mailing Address P.O. BOX 8123

617 FOREST AVE. APT. 2

City

PORTLAND

State

ME

Zip Code

04102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.19752

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JOHN HIATT**

Mailing Address 174 MAIN STREET APT W412

City

BANGOR

State

ME

Zip Code

04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOWN TAXI

Occupation

CAB DRIVER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.19496

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. JOHN HIATT**

Mailing Address 174 MAIN STREET APT W412

City State Zip Code  
BANGOR ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOWN TAXI

Occupation

CAB DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19497

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JOHN HIATT**

Mailing Address 174 MAIN STREET APT W412

City State Zip Code  
BANGOR ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOWN TAXI

Occupation

CAB DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19498

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JOSHUA HIATT**

Mailing Address 185 MOOSEHEAD BLVD

City State Zip Code  
BANGOR ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VIRTUAL LEARNING ACADEMY

Occupation

ADJUNCT INSTRUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19505

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

### A. Rep. GARY HILLIARD

Mailing Address 511 DUNN ROAD

City State Zip Code  
BELGRADE ME 04917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19511

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. Rep. GARY HILLIARD

Mailing Address 511 DUNN ROAD

City State Zip Code  
BELGRADE ME 04917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19512

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. Rep. GARY HILLIARD

Mailing Address 511 DUNN ROAD

City State Zip Code  
BELGRADE ME 04917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19740

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

130.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. MR. WESLEY HURST

Mailing Address 1 TUNIS AVENUE

City State Zip Code  
OLD ORCHARD BEACH ME 04064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19984

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR. WESLEY HURST

Mailing Address 1 TUNIS AVENUE

City State Zip Code  
OLD ORCHARD BEACH ME 04064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19985

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR. WESLEY HURST

Mailing Address 1 TUNIS AVENUE

City State Zip Code  
OLD ORCHARD BEACH ME 04064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19986

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

180.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

### A. MR. WILLIAM HUTCHINS

Mailing Address 113 OAK RIDGE ROAD

City State Zip Code  
BIDDEFORD ME 04005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19128

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. KATE IKHSANOVA

Mailing Address 396 MAIN ST.  
APT. C

City State Zip Code  
WESTBROOK ME 04092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE GOP

Occupation

FINANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19991

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. KATE IKHSANOVA

Mailing Address 396 MAIN ST.  
APT. C

City State Zip Code  
WESTBROOK ME 04092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAINE GOP

Occupation

FINANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 24 / 2016

Transaction ID : SA11AI.19238

Amount of Each Receipt this Period

8.25

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

293.25

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. BENJAMIN INGRAM

Mailing Address 248 PREBLE STREET  
UNIT 1

City State Zip Code  
SOUTH PORTLAND ME 04106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19999

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS. DIANE JACKSON

Mailing Address 266 HERON ROAD

City State Zip Code  
OXFORD ME 04270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

ACCOUNT EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 12 / 2016

Transaction ID : SA11AI.19163

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PETER JOHNSON

Mailing Address PO BOX 697

City State Zip Code  
GREENVILLE ME 04441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 04 / 2016

Transaction ID : SA11AI.19287

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

610.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. HON. SUMNER JONES**

Mailing Address 242 PELTOMA AVENUE

City

PITTSFIELD

State

ME

Zip Code

04967

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

267.75

Date of Receipt

05 / 03 / 2016

Transaction ID : SA11AI.18645

Amount of Each Receipt this Period

8.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HON. SUMNER JONES**

Mailing Address 242 PELTOMA AVENUE

City

PITTSFIELD

State

ME

Zip Code

04967

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

276.00

Date of Receipt

05 / 03 / 2016

Transaction ID : SA11AI.18743

Amount of Each Receipt this Period

8.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HON. SUMNER JONES**

Mailing Address 242 PELTOMA AVENUE

City

PITTSFIELD

State

ME

Zip Code

04967

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

284.25

Date of Receipt

05 / 25 / 2016

Transaction ID : SA11AI.19542

Amount of Each Receipt this Period

8.25

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

24.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. ROBERT KNAPP**

Mailing Address 12 NORUMBEGA DRIVE

City State Zip Code  
CAMDEN ME 04843

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROBERT W. KNAPP, CPA, P.C.

Occupation  
CERTIFIED PUBLIC ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

**Transaction ID : SA11AI.18613**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. ROBERT KNAPP**

Mailing Address 12 NORUMBEGA DRIVE

City State Zip Code  
CAMDEN ME 04843

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROBERT W. KNAPP, CPA, P.C.

Occupation  
CERTIFIED PUBLIC ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2016

**Transaction ID : SA11AI.19288**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DEMI KOUZOUNAS**

Mailing Address 361 SEASIDE AVENUE

City State Zip Code  
SACO ME 04072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DUNSTAN DENTAL CENTER

Occupation  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

**Transaction ID : SA11AI.18724**

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

170.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. ROBERT KUREK**

Mailing Address 60 MORSE ROAD

City

PALERMO

State

ME

Zip Code

04354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18730

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARGI L KYLE**

Mailing Address 12 PENNY ROYAL COURT  
YARMOUTH

City

12 PENNY ROYAL COURT

State

ME

Zip Code

04096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

MARKETING

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18733

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MS. LORA LAFFAN**

Mailing Address 7 BEN PAUL LANE

City

ROCKPORT

State

ME

Zip Code

04856

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19339

Amount of Each Receipt this Period

120.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

275.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 90

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. ARTHUR LANGLEY**

Mailing Address 100 HARDWOOD POINT ROAD

City State Zip Code  
HARRINGTON ME 04643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19346

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. ARTHUR LANGLEY**

Mailing Address 100 HARDWOOD POINT ROAD

City State Zip Code  
HARRINGTON ME 04643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19347

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MR. ARTHUR LANGLEY**

Mailing Address 100 HARDWOOD POINT ROAD

City State Zip Code  
HARRINGTON ME 04643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19348

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

160.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. ARTHUR LANGLEY**

Mailing Address 100 HARDWOOD POINT ROAD

City State Zip Code  
HARRINGTON ME 04643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19349

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. ARTHUR LANGLEY**

Mailing Address 100 HARDWOOD POINT ROAD

City State Zip Code  
HARRINGTON ME 04643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19350

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MR. ARTHUR LANGLEY**

Mailing Address 100 HARDWOOD POINT ROAD

City State Zip Code  
HARRINGTON ME 04643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19351

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

### A. MR. ARTHUR LANGLEY

Mailing Address 100 HARDWOOD POINT ROAD

City State Zip Code  
HARRINGTON ME 04643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19352

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. NICHOLAS S LAPHAM

Mailing Address 704 WALLSTON ROAD

City State Zip Code  
ST. GEORGE ME 04860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

EXECUTIVE COACHING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18759

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. MR. PETER LAVERDIERE

Mailing Address 88 BLACK ISLAND ROAD

City State Zip Code  
OXFORD ME 04270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : SA11AI.19295

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

470.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MAX LINN**

Mailing Address 9 NEWTON WAY

City State Zip Code  
BAR HARBOR ME 04609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18878

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KAREN LOCKWOOD**

Mailing Address 139 MOUNTAIN ROAD

City State Zip Code  
RAYMOND ME 04071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BATH IRON WORKS

Occupation

QUALITY ASSURANCE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18861

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KAREN LOCKWOOD**

Mailing Address 139 MOUNTAIN ROAD

City State Zip Code  
RAYMOND ME 04071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BATH IRON WORKS

Occupation

QUALITY ASSURANCE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18885

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

90.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. KAREN LOCKWOOD**

Mailing Address 139 MOUNTAIN ROAD

City

RAYMOND

State

ME

Zip Code

04071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BATH IRON WORKS

Occupation

QUALITY ASSURANCE ENGINEER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

498.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.18886

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KAREN LOCKWOOD**

Mailing Address 139 MOUNTAIN ROAD

City

RAYMOND

State

ME

Zip Code

04071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BATH IRON WORKS

Occupation

QUALITY ASSURANCE ENGINEER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

558.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.18887

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KAREN LOCKWOOD**

Mailing Address 139 MOUNTAIN ROAD

City

RAYMOND

State

ME

Zip Code

04071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BATH IRON WORKS

Occupation

QUALITY ASSURANCE ENGINEER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

618.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11Al.18888

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

140.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. KAREN LOCKWOOD**

Mailing Address 139 MOUNTAIN ROAD

City

RAYMOND

State

ME

Zip Code

04071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BATH IRON WORKS

Occupation

QUALITY ASSURANCE ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.32

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11AI.18889

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KAREN LOCKWOOD**

Mailing Address 139 MOUNTAIN ROAD

City

RAYMOND

State

ME

Zip Code

04071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BATH IRON WORKS

Occupation

QUALITY ASSURANCE ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.32

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11AI.18935

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KAREN LOCKWOOD**

Mailing Address 139 MOUNTAIN ROAD

City

RAYMOND

State

ME

Zip Code

04071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BATH IRON WORKS

Occupation

QUALITY ASSURANCE ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.65

Date of Receipt

05 / 24 / 2016

Transaction ID : SA11AI.19137

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

138.33

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

### A. MS. REGINA LONGYEAR

Mailing Address PO BOX 100

City State Zip Code  
NEW SHARON ME 04955

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

TAX PREPARER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18618

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. MR. LEONARD LYONS

Mailing Address PO BOX 262

City State Zip Code  
TOPSHAM ME 04086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOPSHAM RENTAL CENTER

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18579

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. MR. LEONARD LYONS

Mailing Address PO BOX 262

City State Zip Code  
TOPSHAM ME 04086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOPSHAM RENTAL CENTER

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18580

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

195.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 90

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. IRVINE W MARSTERS JR.**

Mailing Address 25 G STREET

City

BANGOR

State

ME

Zip Code

04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BANGOR LETTER SHOP, INC.

Occupation

OWNER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

Transaction ID : SA11AI.20225

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KAREN MARSTERS**

Mailing Address 25 G STREET

City

BANGOR

State

ME

Zip Code

04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EASTERN MAINE MEDICAL CENTER

Occupation

PRACTICE MANAGER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1110.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 4 |   | 2 | 0 | 1 | 6 |   |   |

Transaction ID : SA11AI.19285

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MRS. PATRICIA MAYNARD**

Mailing Address 48 ROBIN COURT

City

SKOWHEGAN

State

ME

Zip Code

04976

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SKOWHEGAN SAVINGS BANKING

Occupation

BANKING

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 9 |   | 2 | 0 | 1 | 6 |   |   |

Transaction ID : SA11AI.18999

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

1075.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

### A. MS. LANA MCDONALD

Mailing Address 5461 GULF OF MEXICO SR UNIT 403

City State Zip Code  
LONGBOAT KEY FL 34228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18660

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. BLAKE N MOREY

Mailing Address 14 HIDDEN ACRES LANE

City State Zip Code  
SURRY ME 04684

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19681

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. ANGELA NELSON

Mailing Address 4354 MARDEN HILL RD

City State Zip Code  
PALERMO ME 04354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19817

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1110.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. CYNTHIA NESBIT**

Mailing Address 164 ROBERTS ROAD

City State Zip Code  
 BOWDOIN ME 04287

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L.L. BEAN

Occupation

ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19823

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CYNTHIA NESBIT**

Mailing Address 164 ROBERTS ROAD

City State Zip Code  
 BOWDOIN ME 04287

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L.L. BEAN

Occupation

ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19824

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CYNTHIA NESBIT**

Mailing Address 164 ROBERTS ROAD

City State Zip Code  
 BOWDOIN ME 04287

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L.L. BEAN

Occupation

ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19825

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. REP ROBERT NUTTING**

Mailing Address 430 TOWN FARM ROAD  
PO BOX 100

City State Zip Code  
OAKLAND ME 04963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.20250

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. REP ROBERT NUTTING**

Mailing Address 430 TOWN FARM ROAD  
PO BOX 100

City State Zip Code  
OAKLAND ME 04963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.20251

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. REP ROBERT NUTTING**

Mailing Address 430 TOWN FARM ROAD  
PO BOX 100

City State Zip Code  
OAKLAND ME 04963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.20252

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 51 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. REP ROBERT NUTTING**

Mailing Address 430 TOWN FARM ROAD  
PO BOX 100

City State Zip Code  
OAKLAND ME 04963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

**Transaction ID : SA11AI.20253**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LAURA PARKER**

Mailing Address 26 CHANTEL DR

City State Zip Code  
SIDNEY ME 04330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

**Transaction ID : SA11AI.20018**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MS. CHERYL PARKMAN**

Mailing Address 381 JONES ROAD

City State Zip Code  
PALERMO ME 04354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

**Transaction ID : SA11AI.20024**

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. MS. CHERYL PARKMAN

Mailing Address 381 JONES ROAD

City State Zip Code  
PALERMO ME 04354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
05 31 2016

Transaction ID : SA11AI.19072

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WAYNE R PARRY

Mailing Address 851 ALFRED ROAD

City State Zip Code  
ARUNDEL ME 04046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF MAINE

Occupation

STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
05 02 2016

Transaction ID : SA11AI.20305

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR. JOHN PELLETIER

Mailing Address 199 MAIN STREET

City State Zip Code  
VAN BUREN ME 04785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNIVERSITY OF MAINE FORT KENT

Occupation

ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
05 24 2016

Transaction ID : SA11AI.19170

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 90

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

**A. MRS. SYBILLA PETTINGILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 BLETHEN STREET  
 City LISBON FALLS State ME Zip Code 04252  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 02  | / | 2016    |

Transaction ID : SA11AI.20114

Amount of Each Receipt this Period

60.00

☐ Memo Item

**B. SUSAN J POPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1094 ESSEX STREET  
 City BANGOR State ME Zip Code 04401  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 STATE OF MAINE PROSECUTOR  
 Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 02  | / | 2016    |

Transaction ID : SA11AI.20172

Amount of Each Receipt this Period

60.00

☐ Memo Item

**C. MS. LINDA POST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 40 HENDRICKSON POINT RD  
 City OWLS HEAD State ME Zip Code 04854  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 KNOX COUNTY COUNTY TREASURER  
 Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 02  | / | 2016    |

Transaction ID : SA11AI.19004

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

180.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. JONATHAN POTTLE**

Mailing Address 253 OHIO STREET

City State Zip Code  
BANGOR ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EATON PEABODY

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2016

Transaction ID : SA11AI.18747

Amount of Each Receipt this Period

99.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KEVIN RHEAUME**

Mailing Address 6 DAY STREET

City State Zip Code  
KENNEBUNK ME 04043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARRIS AGENCY

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18625

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KEVIN RHEAUME**

Mailing Address 6 DAY STREET

City State Zip Code  
KENNEBUNK ME 04043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARRIS AGENCY

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18626

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

139.04

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. MRS. JANE ROBBINS

Mailing Address 17 ALDEN LANE

City State Zip Code  
ELIOT ME 03903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18786

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS. JANE ROBBINS

Mailing Address 17 ALDEN LANE

City State Zip Code  
ELIOT ME 03903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18787

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS. BARBARA ROBINSON

Mailing Address PO BOX 50

City State Zip Code  
PARIS ME 04271

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCHIAVNI HEARING CORP.

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19719

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

180.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 90

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. MS. BARBARA ROBINSON

Mailing Address PO BOX 50

City  
PARISState  
MEZip Code  
04271FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCHIAVNI HEARING CORP.

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Transaction ID : SA11AI.18701

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS. ANNALEE ROSENBLATT

Mailing Address 18 TALL PINES ROAD

City

SCARBOROUGH

State

ME

Zip Code

04074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ANNALEE ZIMAN ROSENBLATT INC.

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 24 / 2016

Transaction ID : SA11AI.19254

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR. MATTHEW ROY

Mailing Address 357 RANDALL ROAD

City

LEWISTON

State

ME

Zip Code

04240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SODEXO USA

Occupation

COLD FOOD PREP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19737

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

153.33

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. MATTHEW ROY**

Mailing Address 357 RANDALL ROAD

City State Zip Code  
 LEWISTON ME 04240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SODEXO USA

Occupation

COLD FOOD PREP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 02 2016

**Transaction ID : SA11AI.19738**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. MATTHEW ROY**

Mailing Address 357 RANDALL ROAD

City State Zip Code  
 LEWISTON ME 04240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SODEXO USA

Occupation

COLD FOOD PREP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 02 2016

**Transaction ID : SA11AI.19739**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ELLEN JAMIESON SARNA**

Mailing Address PO BOX 106

City State Zip Code  
 PENOBSCOT ME 04476

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 02 2016

**Transaction ID : SA11AI.19531**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 90  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. ELLEN JAMIESON SARNA**

Mailing Address PO BOX 106

City

PENOBSCOT

State

ME

Zip Code

04476

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11AI.19533

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELLEN JAMIESON SARNA**

Mailing Address PO BOX 106

City

PENOBSCOT

State

ME

Zip Code

04476

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

305.00

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11AI.19534

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ELLEN JAMIESON SARNA**

Mailing Address PO BOX 106

City

PENOBSCOT

State

ME

Zip Code

04476

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

355.00

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11AI.19535

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. PEM SCHAEFFER**

Mailing Address 90 CRESTVIEW LANE

City State Zip Code  
BRUNSWICK ME 04011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 24 / 2016

Transaction ID : SA11AI.19242

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARY SCHIAVONI**

Mailing Address 77 BURNHAM RD

City State Zip Code  
SACO ME 04072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPEECH PATHOLOGY ASSOCIATES, LLC

Occupation

SPEECH PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19193

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARY SCHIAVONI**

Mailing Address 77 BURNHAM RD

City State Zip Code  
SACO ME 04072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPEECH PATHOLOGY ASSOCIATES, LLC

Occupation

SPEECH PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19194

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

170.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 90

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MARY SCHIAVONI**

Mailing Address 77 BURNHAM RD

City State Zip Code  
 SACO ME 04072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SPEECH PATHOLOGY ASSOCIATES, LLC

Occupation  
 SPEECH PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19312

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARY SCHIAVONI**

Mailing Address 77 BURNHAM RD

City State Zip Code  
 SACO ME 04072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SPEECH PATHOLOGY ASSOCIATES, LLC

Occupation  
 SPEECH PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19313

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARY SCHIAVONI**

Mailing Address 77 BURNHAM RD

City State Zip Code  
 SACO ME 04072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SPEECH PATHOLOGY ASSOCIATES, LLC

Occupation  
 SPEECH PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19581

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 90

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MARY SCHIAVONI**

Mailing Address 77 BURNHAM RD

City  
SACOState  
MEZip Code  
04072FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPEECH PATHOLOGY ASSOCIATES, LLC

Occupation

SPEECH PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : SA11AI.19630**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. SCOTT SEEKINS**

Mailing Address P.O. BOX 28

City

SAINT ALBANS

State

ME

Zip Code

04971

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DOROTHEA DIX PSYCHIATRIC CENTER

Occupation

OCCUPATIONAL THERAPY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : SA11AI.19195**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MS. JULIE SHEEHAN**

Mailing Address 6 TWO LIGHTS TERRACE

City

CAPE ELIZABETH

State

ME

Zip Code

04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.O. BAILEY REAL ESTATE

Occupation

ASSOCIATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : SA11AI.19267**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MS. JULIE SHEEHAN**

Mailing Address 6 TWO LIGHTS TERRACE

City

CAPE ELIZABETH

State

ME

Zip Code

04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.O. BAILEY REAL ESTATE

Occupation

ASSOCIATE BROKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1195.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19268

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MS. JULIE SHEEHAN**

Mailing Address 6 TWO LIGHTS TERRACE

City

CAPE ELIZABETH

State

ME

Zip Code

04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.O. BAILEY REAL ESTATE

Occupation

ASSOCIATE BROKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19269

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MS. JULIE SHEEHAN**

Mailing Address 6 TWO LIGHTS TERRACE

City

CAPE ELIZABETH

State

ME

Zip Code

04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.O. BAILEY REAL ESTATE

Occupation

ASSOCIATE BROKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19270

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

125.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MS. JULIE SHEEHAN**

Mailing Address 6 TWO LIGHTS TERRACE

City

CAPE ELIZABETH

State

ME

Zip Code

04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.O. BAILEY REAL ESTATE

Occupation

ASSOCIATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1395.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19271

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MS. JULIE SHEEHAN**

Mailing Address 6 TWO LIGHTS TERRACE

City

CAPE ELIZABETH

State

ME

Zip Code

04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.O. BAILEY REAL ESTATE

Occupation

ASSOCIATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1445.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19272

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MS. JULIE SHEEHAN**

Mailing Address 6 TWO LIGHTS TERRACE

City

CAPE ELIZABETH

State

ME

Zip Code

04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.O. BAILEY REAL ESTATE

Occupation

ASSOCIATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19273

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MS. JULIE SHEEHAN**

Mailing Address 6 TWO LIGHTS TERRACE

City State Zip Code  
 CAPE ELIZABETH ME 04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.O. BAILEY REAL ESTATE

Occupation

ASSOCIATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.19274

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LINDA ST. LOUIS**

Mailing Address 26 TURKEY RUN

City State Zip Code  
 TOPSHAM ME 04086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.18825

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMANDA STAPLES**

Mailing Address 267 RIVER ROAD

City State Zip Code  
 STANDISH ME 04084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

Transaction ID : SA11AI.18833

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

155.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. MEREDITH STRANG BURGESS**

Mailing Address 155 TUTTLE ROAD

City

CUMBERLAND

State

ME

Zip Code

04021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BURGESS ADVERTISING, INC. MERE

Occupation

ADVERTISING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18899

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PATRICK D SURETTE**

Mailing Address 16 RIDGEFIELD DRIVE

City

GORHAM

State

ME

Zip Code

04038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18910

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PATRICK D SURETTE**

Mailing Address 16 RIDGEFIELD DRIVE

City

GORHAM

State

ME

Zip Code

04038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.18911

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

170.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. ELISABETH H THOMPSON**

Mailing Address 153 SHEPHERDS RIVER ROAD

City

BROWNFIELD

State

ME

Zip Code

04010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11AI.19153

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JENNIFER B TYLL**

Mailing Address 165 WALNUT HILL ROAD

City

NORTH YARMOUTH

State

ME

Zip Code

04097

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11AI.20335

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JENNIFER B TYLL**

Mailing Address 165 WALNUT HILL ROAD

City

NORTH YARMOUTH

State

ME

Zip Code

04097

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / 02 / 2016

Transaction ID : SA11AI.20336

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

70.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 90

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. JASON G VALLONE**

Mailing Address 145 SCRIBNER BLVD

City  
LEWISTONState Zip Code  
ME 04240FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 2 |   | 2 | 0 | 1 | 6 |

Transaction ID : SA11AI.19192

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEREK VOLK**

Mailing Address 4 ELBRIDGE OLIVER WAY

City  
SCARBOROUGHState Zip Code  
ME 04074FEC ID number of contributing  
federal political committee.

C

Name of Employer

VOLK PACKAGING CORPORATION

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 4 |   | 2 | 0 | 1 | 6 |

Transaction ID : SA11AI.19168

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MR. CLEMENT VOYER**

Mailing Address 15 KINGFISHER COURT

City  
GORHAMState Zip Code  
ME 04038FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 2 |   | 2 | 0 | 1 | 6 |

Transaction ID : SA11AI.19263

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

570.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. CLEMENT VOYER**

Mailing Address 15 KINGFISHER COURT

City  
GORHAM

State Zip Code  
ME 04038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
05 / 02 / 2016

Transaction ID : SA11AI.19264

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. CLEMENT VOYER**

Mailing Address 15 KINGFISHER COURT

City  
GORHAM

State Zip Code  
ME 04038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
05 / 02 / 2016

Transaction ID : SA11AI.19693

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MR. CLEMENT VOYER**

Mailing Address 15 KINGFISHER COURT

City  
GORHAM

State Zip Code  
ME 04038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
05 / 02 / 2016

Transaction ID : SA11AI.19694

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

### A. KATRINA WAITE

Mailing Address 31 PARK ST APT 3

City  
SOUTH PARIS

State Zip Code  
ME 04281

FEC ID number of contributing  
federal political committee.

C

Name of Employer

C.N. BROWN

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19805

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. JOAN H WARREN

Mailing Address 210 HOLLIS ROAD

City  
DAYTON

State Zip Code  
ME 04005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19809

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. JOSHUA WARREN

Mailing Address 523 PATTEN DRIVE

City  
HERMON

State Zip Code  
ME 04401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.19814

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. WALTER E WHITCOMB**

Mailing Address 165 BIRCHES ROAD

City

WALDO

State

ME

Zip Code

04915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPRINGDALE JERSEYS INC

Occupation

FARMER/LEGISLATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M = M / D = D / Y = Y Y = Y Y  
05 / 24 / 2016

Transaction ID : SA11AI.19255

Amount of Each Receipt this Period

131.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAULINE WILCOX**

Mailing Address 17 CAPE WOODS DRIVE

City

CAPE ELIZABETH

State

ME

Zip Code

04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M = M / D = D / Y = Y Y = Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.20001

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHARLOTTE WINK**

Mailing Address 32 COLONIAL DRIVE

City

DURHAM

State

ME

Zip Code

04222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M = M / D = D / Y = Y Y = Y Y  
05 / 02 / 2016

Transaction ID : SA11AI.20027

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

201.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 90

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MRS. CLAIRE WOOLFOLK**

Mailing Address 154 HALL QUARRY ROAD

City

MOUNT DESERT

State

ME

Zip Code

04660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

Transaction ID : SA11AI.20184

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MRS. CLAIRE WOOLFOLK**

Mailing Address 154 HALL QUARRY ROAD

City

MOUNT DESERT

State

ME

Zip Code

04660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

Transaction ID : SA11AI.20185

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MR. ROBERT ZITZOW**

Mailing Address 210 BUTTERNUT TRAIL

City

WELLS

State

ME

Zip Code

04090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ADXOLE CORP

Occupation

MECHANICAL ENGINEER

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   | 2 | 0 | 1 | 6 |   |   |

Transaction ID : SA11AI.18792

Amount of Each Receipt this Period

60.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

180.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. MR. ROBERT ZITZOW**

Mailing Address 210 BUTTERNUT TRAIL

City State Zip Code  
WELLS ME 04090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ADXOLE CORP

Occupation

MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
05 02 2016

Transaction ID : SA11AI.18793

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MR. ROBERT ZITZOW**

Mailing Address 210 BUTTERNUT TRAIL

City State Zip Code  
WELLS ME 04090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ADXOLE CORP

Occupation

MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
05 02 2016

Transaction ID : SA11AI.18794

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M = M / D = D / Y = Y - Y - Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

20964.45



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 90

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. ANDE FOR MAINE**

Mailing Address PO BOX 970

City State Zip Code  
YARMOUTH ME 04097

FEC ID number of contributing  
federal political committee.

**C** C00603738

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4972.34

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA11C.18327**

Amount of Each Receipt this Period

2836.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CRUZ FOR PRESIDENT**

Mailing Address PO BOX 25376

City State Zip Code  
HOUSTON TX 77265

FEC ID number of contributing  
federal political committee.

**C** C00574624

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

**05** / **23** / **2016**

**Transaction ID : SA11C.18326**

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3586.34

3586.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 90

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **02** / **2016**

**Transaction ID : SA12.18325**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 90

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 5555 HILTON AVENUE, SUITE 106

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| BATON ROUGE | LA    | 70808    |

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 03    |   | 2016        |

**Transaction ID : SB21B.20362**

Amount of Each Disbursement this Period

|       |
|-------|
| 40.65 |
|-------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 5555 HILTON AVENUE, SUITE 106

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| BATON ROUGE | LA    | 70808    |

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 24    |   | 2016        |

**Transaction ID : SB21B.20364**

Amount of Each Disbursement this Period

|       |
|-------|
| 54.21 |
|-------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 5555 HILTON AVENUE, SUITE 106

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| BATON ROUGE | LA    | 70808    |

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 25    |   | 2016        |

**Transaction ID : SB21B.20365**

Amount of Each Disbursement this Period

|       |
|-------|
| 19.34 |
|-------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|        |
|--------|
| 114.20 |
|--------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 76 OF 90

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. CROSS CONVENTION CENTER**

Mailing Address 515 MAIN STREET

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| BANGOR | ME    | 04401    |

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 20    |   | 2016      |

**Transaction ID : SB21B.20358**

Amount of Each Disbursement this Period

|          |
|----------|
| 70000.00 |
|----------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DIRECT MAIL SYSTEMS/DIRECT RESPONSE MARKETING**

Mailing Address 12450 AUTOMOBILE DOULEVARD

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| CLEARWATER | FL    | 33762-1747 |

Purpose of Disbursement  
PRINTING & POSTAGE:NO FEDERAL CANDIDATES

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 04    |   | 2016      |

**Transaction ID : SB21B.20351**

Amount of Each Disbursement this Period

|        |
|--------|
| 800.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TD BANK**

Mailing Address 101 WESTERN AVE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| AUGUSTA | ME    | 04330    |

Purpose of Disbursement  
BANK FEES

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 02    |   | 2016      |

**Transaction ID : SB21B.20360**

Amount of Each Disbursement this Period

|       |
|-------|
| 44.95 |
|-------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

|          |
|----------|
| 70844.95 |
|----------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 90

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. TD BANK**

Mailing Address 101 WESTERN AVE

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>AUGUSTA | State<br>ME | Zip Code<br>04330 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
BANK FEES

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 02    |   | 2016        |

**Transaction ID : SB21B.20361**

Amount of Each Disbursement this Period

|       |
|-------|
| 15.00 |
|-------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TD BANK**

Mailing Address 101 WESTERN AVE

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>AUGUSTA | State<br>ME | Zip Code<br>04330 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
BANK FEES

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 05    |   | 2016        |

**Transaction ID : SB21B.20363**

Amount of Each Disbursement this Period

|       |
|-------|
| 20.00 |
|-------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TD BANK**

Mailing Address 101 WESTERN AVE

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>AUGUSTA | State<br>ME | Zip Code<br>04330 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
BANK FEES

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 31    |   | 2016        |

**Transaction ID : SB21B.20341**

Amount of Each Disbursement this Period

|       |
|-------|
| 25.00 |
|-------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|       |
|-------|
| 60.00 |
|-------|

|          |
|----------|
| 71019.15 |
|----------|

|  |     |  |     |  |     |          |     |  |    |  |     |
|--|-----|--|-----|--|-----|----------|-----|--|----|--|-----|
|  | 21b |  | 22  |  | 23  |          | 24  |  | 25 |  | 26  |
|  | 27  |  | 28a |  | 28b | <b>x</b> | 28c |  | 29 |  | 30b |

MAINE REPUBLICAN PARTY

### A. HOLBROOK FOR CONGRESS

Mailing Address 135 MAINE STREET  
STE A-113

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| BRUNSWICK | ME    | 04011    |

| Purpose of Disbursement |
|-------------------------|
| CONTRIBUTION REFUND     |

Candidate Name \_\_\_\_\_

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |
| State:         | District:                |           |

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB28C.20347

Amount of Each Disbursement this Period

750.00

 Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

| City | State | Zip Code |
|------|-------|----------|
|------|-------|----------|

### Purpose of Disbursement

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |
| State:         | District:                |           |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

| City | State | Zip Code |
|------|-------|----------|
|------|-------|----------|

### Purpose of Disbursement

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |
| State:         | District:                |           |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

Date of Disbursement

Amount of Each Disbursement this Period

 Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00

750.00

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 79 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

|  |       |                      |  |  |
|--|-------|----------------------|--|--|
| <b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.20346</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| <b>USPS</b><br>Mailing Address 126 WESTERN AVE   |       |                      |  |  |
| City   | State | Zip Code             |  |  |
| AUGUSTA  | ME    | 04330                |  |  |
| Purpose of Disbursement:<br>POSTAGE  |       | <input type="text"/> | Allocated Activity or Event Year-To-Date<br><input type="text"/> 117007.09   |  |
| Activity or Event Identifier:<br><b>Administrative</b>   |       |                      | Date <input type="text"/> 05 / <input type="text"/> 03 / <input type="text"/> 2016   |  |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE   |  |
| <input type="text"/> 26.32   |       |                      | <input type="text"/> 67.68   |  |
|  |       | =                    | TOTAL AMOUNT   |  |
|  |       |                      | <input type="text"/> 94.00   |  |

|  |       |                      |  |  |
|--|-------|----------------------|--|--|
| <b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.20349</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| <b>ALBISON'S PRINTING, INC.</b><br>Mailing Address 124 RIVERSIDE DRIVE   |       |                      |  |  |
| City   | State | Zip Code             |  |  |
| AUGUSTA  | ME    | 04330                |  |  |
| Purpose of Disbursement:<br>PRINTING & DESIGN SERVICES: ENVELOPES  |       | <input type="text"/> | Allocated Activity or Event Year-To-Date<br><input type="text"/> 117181.17   |  |
| Activity or Event Identifier:<br>Administrative  |       |                      | Date <input type="text"/> 05 / <input type="text"/> 04 / <input type="text"/> 2016   |  |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE   |  |
| <input type="text"/> 48.74   |       |                      | <input type="text"/> 125.34  |  |
|  |       | =                    | TOTAL AMOUNT   |  |
|  |       |                      | <input type="text"/> 174.08  |  |

|  |       |                      |  |  |
|--|-------|----------------------|--|--|
| <b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.20350</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| <b>CIT</b><br>Mailing Address 21146 NETWORK PLACE  |       |                      |  |  |
| City   | State | Zip Code             |  |  |
| CHICAGO  | IL    | 60673-1211           |  |  |
| Purpose of Disbursement:<br>EQUIPMENT RENTAL: COPIER   |       | <input type="text"/> | Allocated Activity or Event Year-To-Date<br><input type="text"/> 117903.89   |  |
| Activity or Event Identifier:<br>Administrative  |       |                      | Date <input type="text"/> 05 / <input type="text"/> 04 / <input type="text"/> 2016   |  |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE   |  |
| <input type="text"/> 202.36  |       |                      | <input type="text"/> 520.36  |  |
|  |       | =                    | TOTAL AMOUNT   |  |
|  |       |                      | <input type="text"/> 722.72  |  |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|                             |   |                             |   |                             |
|-----------------------------|---|-----------------------------|---|-----------------------------|
| FEDERAL SHARE               | + | NONFEDERAL SHARE            | = | TOTAL AMOUNT                |
| <input type="text"/> 277.42 |   | <input type="text"/> 713.38 |   | <input type="text"/> 990.80 |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| FEDERAL SHARE        | NONFEDERAL SHARE     | TOTAL AMOUNT         |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 80 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

|  |       |   |  |  |                             |
|--|-------|---|--|--|-----------------------------|
| <b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.20352</b> <input type="checkbox"/> Memo Item<br><b>TRANSCO BUSINESS TECHNOLOGIES</b> |       |   | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |                             |
| Mailing Address 34 LEIGHTON ROAD   |       |   |  |  |                             |
| City   | State | Zip Code                                  |  |  |                             |
| AUGUSTA  | ME    | 04330                                     |  |  |                             |
| Purpose of Disbursement:<br>OFFICE SUPPLIES  |       | <input type="text"/><br>Category/<br>Type | Allocated Activity or Event Year-To-Date<br><input type="text"/> 118659.58   |  |                             |
| Activity or Event Identifier:<br>Administrative  |       |   | Date <input type="text"/> 05 / <input type="text"/> 04 / <input type="text"/> 2016   |  |                             |
| FEDERAL SHARE  |       | +   | NONFEDERAL SHARE   |  | =                           |
| <input type="text"/> 211.59  |       |   | <input type="text"/> 544.10  |  | <input type="text"/> 755.69 |

|  |       |   |  |  |                              |
|--|-------|---|--|--|------------------------------|
| <b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.20377</b> <input type="checkbox"/> Memo Item<br><b>MR. JOSEPH TURCOTTE</b> |       |   | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |                              |
| Mailing Address 602 BARKER ROAD  |       |   |  |  |                              |
| City   | State | Zip Code                                  |  |  |                              |
| NEW VINEYARD   | ME    | 04956                                     |  |  |                              |
| Purpose of Disbursement:<br>PAYROLL<25% FEDERAL  |       | <input type="text"/><br>Category/<br>Type | Allocated Activity or Event Year-To-Date<br><input type="text"/> 119852.82   |  |                              |
| Activity or Event Identifier:<br>Administrative  |       |   | Date <input type="text"/> 05 / <input type="text"/> 05 / <input type="text"/> 2016   |  |                              |
| FEDERAL SHARE  |       | +   | NONFEDERAL SHARE   |  | =                            |
| <input type="text"/> 334.11  |       |   | <input type="text"/> 859.13  |  | <input type="text"/> 1193.24 |

|   |       |   |  |  |                             |
|---|-------|---|--|--|-----------------------------|
| <b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.20378</b> <input type="checkbox"/> Memo Item<br><b>MS. REBECCA TELEGA</b> |       |   | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |                             |
| Mailing Address 37 SUNSET DRIVE LOOP  |       |   |  |  |                             |
| City  | State | Zip Code                                  |  |  |                             |
| PEMAQUID  | ME    | 04558                                     |  |  |                             |
| Purpose of Disbursement:<br>PAYROLL<25% FEDERAL   |       | <input type="text"/><br>Category/<br>Type | Allocated Activity or Event Year-To-Date<br><input type="text"/> 120823.27   |  |                             |
| Activity or Event Identifier:<br>Administrative   |       |   | Date <input type="text"/> 05 / <input type="text"/> 05 / <input type="text"/> 2016   |  |                             |
| FEDERAL SHARE   |       | +   | NONFEDERAL SHARE   |  | =                           |
| <input type="text"/> 271.73   |       |   | <input type="text"/> 698.72  |  | <input type="text"/> 970.45 |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|                             |   |                              |   |                              |
|-----------------------------|---|------------------------------|---|------------------------------|
| FEDERAL SHARE               | + | NONFEDERAL SHARE             | = | TOTAL AMOUNT                 |
| <input type="text"/> 817.43 |   | <input type="text"/> 2101.95 |   | <input type="text"/> 2919.38 |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|                      |  |                      |  |                      |
|----------------------|--|----------------------|--|----------------------|
| FEDERAL SHARE        |  | NONFEDERAL SHARE     |  | TOTAL AMOUNT         |
| <input type="text"/> |  | <input type="text"/> |  | <input type="text"/> |



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 81 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

|  |       |                      |   |                      |
|--|-------|----------------------|---|----------------------|
| A. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20379</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |                      |
| <b>JASON SAVAGE</b>  |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                      |
| Mailing Address 77 OLD COUNTY RD S   |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                      |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                      |
| WEST ENFIELD   | ME    | 04493                | Allocated Activity or Event Year-To-Date  |                      |
| Purpose of Disbursement:<br>PAYROLL<25% FEDERAL  |       | <input type="text"/> | 123159.03   |                      |
| Activity or Event Identifier:<br><b>Administrative</b>   |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |                      |
|  |       |                      | 05 / 05 / 2016  |                      |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  | = TOTAL AMOUNT       |
| <input type="text"/>   |       |                      | <input type="text"/>  | <input type="text"/> |
| 654.01   |       |                      | 1681.75   | 2335.76              |

|  |       |                      |   |                      |
|--|-------|----------------------|---|----------------------|
| B. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20380</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |                      |
| <b>KHRYSTINA E MCLAUGHLIN</b>  |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                      |
| Mailing Address 14 WOOD POND ROAD  |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                      |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                      |
| BRUNSWICK  | ME    | 04011                | Allocated Activity or Event Year-To-Date  |                      |
| Purpose of Disbursement:<br>PAYROLL<25% FEDERAL  |       | <input type="text"/> | 124171.09   |                      |
| Activity or Event Identifier:<br>Administrative  |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |                      |
|  |       |                      | 05 / 05 / 2016  |                      |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  | = TOTAL AMOUNT       |
| <input type="text"/>   |       |                      | <input type="text"/>  | <input type="text"/> |
| 283.38   |       |                      | 728.68  | 1012.06              |

|  |       |                      |   |                      |
|--|-------|----------------------|---|----------------------|
| C. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20381</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |                      |
| <b>EKATERINA IKHSANOVA</b>   |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                      |
| Mailing Address 43 PROSPECT ST<br>APT 16   |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                      |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                      |
| WESTBROOK  | ME    | 04092                | Allocated Activity or Event Year-To-Date  |                      |
| Purpose of Disbursement:<br>PAYROLL<25% FEDERAL  |       | <input type="text"/> | 124788.53   |                      |
| Activity or Event Identifier:<br>Administrative  |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |                      |
|  |       |                      | 05 / 05 / 2016  |                      |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  | = TOTAL AMOUNT       |
| <input type="text"/>   |       |                      | <input type="text"/>  | <input type="text"/> |
| 172.88   |       |                      | 444.56  | 617.44               |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|                      |   |                      |   |                      |
|----------------------|---|----------------------|---|----------------------|
| FEDERAL SHARE        | + | NONFEDERAL SHARE     | = | TOTAL AMOUNT         |
| <input type="text"/> |   | <input type="text"/> |   | <input type="text"/> |
| 1110.27              |   | 2854.99              |   | 3965.26              |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| FEDERAL SHARE        | NONFEDERAL SHARE     | TOTAL AMOUNT         |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 82 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

|   |       |          |   |   |  |
|---|-------|----------|---|---|--|
| <b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.20382</b>                       |       |          | <input type="checkbox"/> Memo Item  | Allocated Activity or Event:  |  |
| <b>MS. MICHELLE DALE</b>  |       |          |   | <input checked="" type="checkbox"/> Administrative  | <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt                               |
| Mailing Address 409 CHURCH HILL ROAD  |       |          |   | <input type="checkbox"/> Voter Drive  | <input type="checkbox"/> Direct Candidate Support  |
| City  | State | Zip Code |   | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |  |
| AUGUSTA   | ME    | 04330    |   |   |  |
| Purpose of Disbursement:<br>PAYROLL<25% FEDERAL   |       |          | <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>           | Allocated Activity or Event Year-To-Date  |  |
| Activity or Event Identifier:<br><b>Administrative</b>  |       |          |   | <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">125827.34</div>                    |  |
|   |       |          | Category/<br>Type   | Date <div style="display: flex; justify-content: space-around;"><div>M M / D D / Y Y Y Y Y Y<br/>05 05 2016</div></div> |  |
| FEDERAL SHARE   |       | +        | NONFEDERAL SHARE  | =   | TOTAL AMOUNT   |
| <div style="border: 1px solid black; width: 100px; text-align: right; padding: 2px;">290.87</div> |       |          | <div style="border: 1px solid black; width: 100px; text-align: right; padding: 2px;">747.94</div> |   | <div style="border: 1px solid black; width: 100px; text-align: right; padding: 2px;">1038.81</div> |

|   |       |          |  |   |  |
|---|-------|----------|--|---|--|
| <b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.20383</b>                       |       |          | <input type="checkbox"/> Memo Item   | Allocated Activity or Event:  |  |
| <b>EPAY BUSINESS SOLUTIONS INC.</b>   |       |          |  | <input checked="" type="checkbox"/> Administrative  | <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt                               |
| Mailing Address 27A MIDSTATE DRIVE  |       |          |  | <input type="checkbox"/> Voter Drive  | <input type="checkbox"/> Direct Candidate Support  |
| City  | State | Zip Code |  | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |  |
| AUBURN  | MA    | 01501    |  |   |  |
| Purpose of Disbursement:<br>PAYROLL SERVICES/TAX<25% FEDERAL                                      |       |          | <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>            | Allocated Activity or Event Year-To-Date  |  |
| Activity or Event Identifier:<br>Administrative   |       |          |  | <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">128751.77</div>                    |  |
|   |       |          | Category/<br>Type  | Date <div style="display: flex; justify-content: space-around;"><div>M M / D D / Y Y Y Y Y Y<br/>05 05 2016</div></div> |  |
| FEDERAL SHARE   |       | +        | NONFEDERAL SHARE   | =   | TOTAL AMOUNT   |
| <div style="border: 1px solid black; width: 100px; text-align: right; padding: 2px;">818.84</div> |       |          | <div style="border: 1px solid black; width: 100px; text-align: right; padding: 2px;">2105.59</div> |   | <div style="border: 1px solid black; width: 100px; text-align: right; padding: 2px;">2924.43</div> |

|   |       |          |   |   |   |
|---|-------|----------|---|---|---|
| <b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.20366</b>                       |       |          | <input type="checkbox"/> Memo Item  | Allocated Activity or Event:  |   |
| <b>MAIL CHIMP</b>   |       |          |   | <input checked="" type="checkbox"/> Administrative  | <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt                              |
| Mailing Address 675 PONCE DE LEON AVENUE<br>NE SUITE 5000   |       |          |   | <input type="checkbox"/> Voter Drive  | <input type="checkbox"/> Direct Candidate Support   |
| City  | State | Zip Code |   | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |   |
| ATLANTA   | GA    | 30308    |   |   |   |
| Purpose of Disbursement:<br>EMAIL COMMUNICATIONS  |       |          | <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>           | Allocated Activity or Event Year-To-Date  |   |
| Activity or Event Identifier:<br>Administrative   |       |          |   | <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">129126.77</div>                    |   |
|   |       |          | Category/<br>Type   | Date <div style="display: flex; justify-content: space-around;"><div>M M / D D / Y Y Y Y Y Y<br/>05 10 2016</div></div> |   |
| FEDERAL SHARE   |       | +        | NONFEDERAL SHARE  | =   | TOTAL AMOUNT  |
| <div style="border: 1px solid black; width: 100px; text-align: right; padding: 2px;">105.00</div> |       |          | <div style="border: 1px solid black; width: 100px; text-align: right; padding: 2px;">270.00</div> |   | <div style="border: 1px solid black; width: 100px; text-align: right; padding: 2px;">375.00</div> |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1214.71       |   | 3123.53          |   | 4338.24      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 83 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY****A. Full Name (Last, First, Middle Initial) Transaction ID : H4.20344**☐ Memo Item**USPS**

Mailing Address 126 WESTERN AVE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| AUGUSTA | ME    | 04330    |

Purpose of Disbursement:  
POSTAGE

Activity or Event Identifier:

**Administrative**Category/  
Type

Allocated Activity or Event:

- ☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

129267.77

Date MM / DD / YYYY  
05 / 11 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

39.48

101.52

141.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : H4.20353**☐ Memo Item**TIME WARNER CABLE**

Mailing Address P.O. BOX 70872

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| CHARLOTTE | NC    | 28272    |

Purpose of Disbursement:  
BROADBAND SERVICES

Activity or Event Identifier:

Administrative

Category/  
Type

Allocated Activity or Event:

- ☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

129366.22

Date MM / DD / YYYY  
05 / 16 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

27.57

70.88

98.45

**C. Full Name (Last, First, Middle Initial) Transaction ID : H4.20354**☐ Memo Item**MS. MICHELLE DALE**

Mailing Address 409 CHURCH HILL ROAD

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| AUGUSTA | ME    | 04330    |

Purpose of Disbursement:  
DALE REIMBURSEMENT:TRAVEL:MILEAGE

Activity or Event Identifier:

Administrative

Category/  
Type

Allocated Activity or Event:

- ☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

129680.73

Date MM / DD / YYYY  
05 / 16 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

88.06

226.45

314.51

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

155.11

398.85

553.96

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 84 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

|  |       |                      |   |  |
|--|-------|----------------------|---|--|
| A. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20355</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |  |
| <b>GREAT WORKS INTERNET</b>  |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 8 POMERLEAU STREET   |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |  |
| BIDDEFORD  | ME    | 04005                | Allocated Activity or Event Year-To-Date  |  |
| Purpose of Disbursement:<br>BROADBAND SERVICES   |       | <input type="text"/> | 129750.85   |  |
| Activity or Event Identifier:<br><b>Administrative</b>   |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |  |
|  |       |                      | 05 / 16 / 2016  |  |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  |  |
| 19.63  |       |                      | 50.49   |  |
|  |       | =                    | TOTAL AMOUNT  |  |
|  |       |                      | 70.12   |  |

|  |       |                      |   |  |
|--|-------|----------------------|---|--|
| B. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20356</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |  |
| <b>AETNA</b>   |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address P.O. BOX 7247-0213   |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |  |
| PHILADELPIA  | PA    | 19170-0213           | Allocated Activity or Event Year-To-Date  |  |
| Purpose of Disbursement:<br>INSURANCE<25% FEDERAL  |       | <input type="text"/> | 131058.45   |  |
| Activity or Event Identifier:<br>Administrative  |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |  |
|  |       |                      | 05 / 16 / 2016  |  |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  |  |
| 366.13   |       |                      | 941.47  |  |
|  |       | =                    | TOTAL AMOUNT  |  |
|  |       |                      | 1307.60   |  |

|  |       |                      |   |  |
|--|-------|----------------------|---|--|
| C. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20357</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |  |
| <b>PITNEY BOWES</b>  |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address P.O. BOX 371874  |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |  |
| PITTSBURG  | PA    | 15250-7874           | Allocated Activity or Event Year-To-Date  |  |
| Purpose of Disbursement:<br>POSTAGE  |       | <input type="text"/> | 131101.45   |  |
| Activity or Event Identifier:<br>Administrative  |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |  |
|  |       |                      | 05 / 16 / 2016  |  |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  |  |
| 12.04  |       |                      | 30.96   |  |
|  |       | =                    | TOTAL AMOUNT  |  |
|  |       |                      | 43.00   |  |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 397.80        |   | 1022.92          |   | 1420.72      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 85 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

|  |       |                      |   |                |
|--|-------|----------------------|---|----------------|
| A. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20345</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |                |
| <b>USPS</b>  |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                |
| Mailing Address 126 WESTERN AVE  |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                |
| AUGUSTA  | ME    | 04330                |   |                |
| Purpose of Disbursement:<br>POSTAGE  |       | <input type="text"/> | Allocated Activity or Event Year-To-Date  |                |
| Activity or Event Identifier:<br><b>Administrative</b>   |       |                      | 131197.75   |                |
|  |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |                |
|  |       |                      | 05 / 18 / 2016  |                |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  | = TOTAL AMOUNT |
| 26.96  |       |                      | 69.34   | 96.30          |

|  |       |                      |   |                |
|--|-------|----------------------|---|----------------|
| B. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20368</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |                |
| <b>AMAZON.COM, INC.</b>  |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                |
| Mailing Address 1200 12TH AVE SOUTH STE. 1200  |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                |
| SEATTLE  | WA    | 98144                |   |                |
| Purpose of Disbursement:<br>COMPUTER PURCHASE  |       | <input type="text"/> | Allocated Activity or Event Year-To-Date  |                |
| Activity or Event Identifier:<br>Administrative  |       |                      | 132311.75   |                |
|  |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |                |
|  |       |                      | 05 / 18 / 2016  |                |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  | = TOTAL AMOUNT |
| 311.92   |       |                      | 802.08  | 1114.00        |

|  |       |                      |   |                |
|--|-------|----------------------|---|----------------|
| C. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20369</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |                |
| <b>LYNDA.COM</b>   |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                |
| Mailing Address 6410 VIA REAL  |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                |
| CARPINTEIRA  | CA    | 93013                |   |                |
| Purpose of Disbursement:<br>SOFTWARE SERVICES  |       | <input type="text"/> | Allocated Activity or Event Year-To-Date  |                |
| Activity or Event Identifier:<br>Administrative  |       |                      | 132349.25   |                |
|  |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |                |
|  |       |                      | 05 / 19 / 2016  |                |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  | = TOTAL AMOUNT |
| 10.50  |       |                      | 27.00   | 37.50          |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 349.38        |   | 898.42           |   | 1247.80      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 86 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

|  |       |                      |   |                      |
|--|-------|----------------------|---|----------------------|
| A. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20384</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |                      |
| <b>MR. JOSEPH TURCOTTE</b>   |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                      |
| Mailing Address 602 BARKER ROAD  |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                      |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                      |
| NEW VINEYARD   | ME    | 04956                | Allocated Activity or Event Year-To-Date  |                      |
| Purpose of Disbursement:<br>PAYROLL<25% FEDERAL  |       | <input type="text"/> | 133542.49   |                      |
| Activity or Event Identifier:<br><b>Administrative</b>   |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |                      |
|  |       |                      | 05 / 19 / 2016  |                      |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  | = TOTAL AMOUNT       |
| <input type="text"/>   |       |                      | <input type="text"/>  | <input type="text"/> |
| 334.11   |       |                      | 859.13  | 1193.24              |

|  |       |                      |   |                      |
|--|-------|----------------------|---|----------------------|
| B. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20385</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |                      |
| <b>MS. REBECCA TELEGA</b>  |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                      |
| Mailing Address 37 SUNSET DRIVE LOOP   |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                      |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                      |
| PEMAQUID   | ME    | 04558                | Allocated Activity or Event Year-To-Date  |                      |
| Purpose of Disbursement:<br>PAYROLL<25% FEDERAL  |       | <input type="text"/> | 134512.94   |                      |
| Activity or Event Identifier:<br>Administrative  |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |                      |
|  |       |                      | 05 / 19 / 2016  |                      |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  | = TOTAL AMOUNT       |
| <input type="text"/>   |       |                      | <input type="text"/>  | <input type="text"/> |
| 271.73   |       |                      | 698.72  | 970.45               |

|  |       |                      |   |                      |
|--|-------|----------------------|---|----------------------|
| C. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20386</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:  |                      |
| <b>JASON SAVAGE</b>  |       |                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                      |
| Mailing Address 77 OLD COUNTY RD S   |       |                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                      |
| City   | State | Zip Code             | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                      |
| WEST ENFIELD   | ME    | 04493                | Allocated Activity or Event Year-To-Date  |                      |
| Purpose of Disbursement:<br>PAYROLL<25% FEDERAL  |       | <input type="text"/> | 136848.70   |                      |
| Activity or Event Identifier:<br>Administrative  |       | Category/<br>Type    | Date <input type="text"/> / <input type="text"/> / <input type="text"/>   |                      |
|  |       |                      | 05 / 19 / 2016  |                      |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE  | = TOTAL AMOUNT       |
| <input type="text"/>   |       |                      | <input type="text"/>  | <input type="text"/> |
| 654.01   |       |                      | 1681.75   | 2335.76              |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|                      |   |                      |   |                      |
|----------------------|---|----------------------|---|----------------------|
| FEDERAL SHARE        | + | NONFEDERAL SHARE     | = | TOTAL AMOUNT         |
| <input type="text"/> |   | <input type="text"/> |   | <input type="text"/> |
| 1259.85              |   | 3239.60              |   | 4499.45              |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| FEDERAL SHARE        | NONFEDERAL SHARE     | TOTAL AMOUNT         |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 87 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY****A. Full Name (Last, First, Middle Initial) Transaction ID : H4.20387**☐ Memo Item**KHRYSTINA E MCLAUGHLIN**

Mailing Address 14 WOOD POND ROAD

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| BRUNSWICK | ME    | 04011    |

Purpose of Disbursement:  
PAYROLL<25% FEDERAL

Activity or Event Identifier:

**Administrative**Category/  
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

137860.76

Date 05 / 19 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

283.38

728.68

1012.06

**B. Full Name (Last, First, Middle Initial) Transaction ID : H4.20388**☐ Memo Item**EKATERINA IKHSANOVA**Mailing Address 43 PROSPECT ST  
APT 16

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| WESTBROOK | ME    | 04092    |

Purpose of Disbursement:  
PAYROLL<25% FEDERAL

Activity or Event Identifier:

Administrative

Category/  
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

138478.20

Date 05 / 19 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

172.88

444.56

617.44

**C. Full Name (Last, First, Middle Initial) Transaction ID : H4.20389**☐ Memo Item**MS. MICHELLE DALE**

Mailing Address 409 CHURCH HILL ROAD

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| AUGUSTA | ME    | 04330    |

Purpose of Disbursement:  
PAYROLL<25% FEDERAL

Activity or Event Identifier:

Administrative

Category/  
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

139517.01

Date 05 / 19 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

290.87

747.94

1038.81

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

747.13

1921.18

2668.31

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 88 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

|  |       |  |   |  |
|--|-------|--|---|--|
| A. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20390</b> <input type="checkbox"/> Memo Item |       |  | Allocated Activity or Event:  |  |
| <b>EPAY BUSINESS SOLUTIONS INC.</b>  |       |  | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 27A MIDSTATE DRIVE   |       |  | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City   | State | Zip Code   | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |  |
| AUBURN   | MA    | 01501  |   |  |
| Purpose of Disbursement:<br>PAYROLL SERVICES/TAX<25% FEDERAL   |       | <input type="text"/>   | Allocated Activity or Event Year-To-Date  |  |
| Activity or Event Identifier:<br><b>Administrative</b>   |       |  | 142436.79   |  |
| Date   |       | <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>05 / 19 / 2016</div> |   |  |
| FEDERAL SHARE  |       | +  | NONFEDERAL SHARE  |  |
| 817.54   |       |  | 2102.24   |  |
|  |       | =  | TOTAL AMOUNT  |  |
|  |       |  | 2919.78   |  |

|  |       |  |   |  |
|--|-------|--|---|--|
| B. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20359</b> <input type="checkbox"/> Memo Item |       |  | Allocated Activity or Event:  |  |
| <b>CENTRAL MAINE POWER</b>   |       |  | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address P.O. BOX 847810  |       |  | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City   | State | Zip Code   | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |  |
| BOSTON   | MA    | 02284-7810   |   |  |
| Purpose of Disbursement:<br>UTILITIES  |       | <input type="text"/>   | Allocated Activity or Event Year-To-Date  |  |
| Activity or Event Identifier:<br>Administrative  |       |  | 142511.23   |  |
| Date   |       | <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>05 / 20 / 2016</div> |   |  |
| FEDERAL SHARE  |       | +  | NONFEDERAL SHARE  |  |
| 20.84  |       |  | 53.60   |  |
|  |       | =  | TOTAL AMOUNT  |  |
|  |       |  | 74.44   |  |

|  |       |  |   |  |
|--|-------|--|---|--|
| C. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.20370</b> <input type="checkbox"/> Memo Item |       |  | Allocated Activity or Event:  |  |
| <b>ADOBE SYSTEMS, INC</b>  |       |  | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 345 PARK AVENUE  |       |  | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City   | State | Zip Code   | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |  |
| SAN JOSE   | CA    | 95101  |   |  |
| Purpose of Disbursement:<br>ONLINE SUBSCRIPTIONS   |       | <input type="text"/>   | Allocated Activity or Event Year-To-Date  |  |
| Activity or Event Identifier:<br>Administrative  |       |  | 142590.34   |  |
| Date   |       | <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>05 / 20 / 2016</div> |   |  |
| FEDERAL SHARE  |       | +  | NONFEDERAL SHARE  |  |
| 22.15  |       |  | 56.96   |  |
|  |       | =  | TOTAL AMOUNT  |  |
|  |       |  | 79.11   |  |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 860.53        |   | 2212.80          |   | 3073.33      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|---------------|------------------|--------------|
|               |                  |              |



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 89 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY****A. Full Name (Last, First, Middle Initial) Transaction ID : H4.20371**☐ Memo Item**INTUIT INC**

Mailing Address 2632 MARINE WAY

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| MOUNTAIN VIEW | CA    | 94043    |

Purpose of Disbursement:  
SOFTWARE SERVICES

Activity or Event Identifier:

**Administrative**Category/  
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

142635.34

Date 05 / 20 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

12.60

32.40

45.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : H4.20372**☐ Memo Item**THE GO DADDY GROUP INC.**

Mailing Address 14455 N. HAYDEN ROAD SUITE 226

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| SCOTTSDALE | AZ    | 85260-6947 |

Purpose of Disbursement:  
ONLINE SUBSCRIPTIONS

Activity or Event Identifier:

Administrative

Category/  
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

142654.33

Date 05 / 23 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.32

13.67

18.99

**C. Full Name (Last, First, Middle Initial) Transaction ID : H4.20373**☐ Memo Item**VERTICALRESPONSE INC.**Mailing Address 50 BEALE ST  
10TH FLOOR

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| SAN FRANCISCO | CA    | 94105    |

Purpose of Disbursement:  
ONLINE SUBSCRIPTIONS

Activity or Event Identifier:

Administrative

Category/  
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

143032.33

Date 05 / 23 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

105.84

272.16

378.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

123.76

318.23

441.99

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 90 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**MAINE REPUBLICAN PARTY**

|  |       |                      |  |  |
|--|-------|----------------------|--|--|
| <b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.20374</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| <b>CONSTANT CONTACT</b><br>Mailing Address 1601 TRAPELO RD   |       |                      |  |  |
| City   | State | Zip Code             |  |  |
| WALTHAM  | MA    | 02451                |  |  |
| Purpose of Disbursement:<br>ONLINE SUBSCRIPTIONS   |       | <input type="text"/> | Allocated Activity or Event Year-To-Date<br><input type="text"/> 143052.33   |  |
| Activity or Event Identifier:<br><b>Administrative</b>   |       |                      | Date <input type="text"/> 05 / <input type="text"/> 26 / <input type="text"/> 2016   |  |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE   |  |
| <input type="text"/> 5.60  |       |                      | <input type="text"/> 14.40   |  |
|  |       | =                    | TOTAL AMOUNT   |  |
|  |       |                      | <input type="text"/> 20.00   |  |

|  |       |                      |  |  |
|--|-------|----------------------|--|--|
| <b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.20342</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| <b>USPS</b><br>Mailing Address 126 WESTERN AVE   |       |                      |  |  |
| City   | State | Zip Code             |  |  |
| AUGUSTA  | ME    | 04330                |  |  |
| Purpose of Disbursement:<br>POSTAGE  |       | <input type="text"/> | Allocated Activity or Event Year-To-Date<br><input type="text"/> 143252.33   |  |
| Activity or Event Identifier:<br>Administrative  |       |                      | Date <input type="text"/> 05 / <input type="text"/> 31 / <input type="text"/> 2016   |  |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE   |  |
| <input type="text"/> 56.00   |       |                      | <input type="text"/> 144.00  |  |
|  |       | =                    | TOTAL AMOUNT   |  |
|  |       |                      | <input type="text"/> 200.00  |  |

|  |       |                      |  |  |
|--|-------|----------------------|--|--|
| <b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.20375</b> <input type="checkbox"/> Memo Item |       |                      | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| <b>WAYFAIR LLC</b><br>Mailing Address 4 COPLEY PLACE<br>7TH FLOOR  |       |                      |  |  |
| City   | State | Zip Code             |  |  |
| BOSTON   | MA    | 02116                |  |  |
| Purpose of Disbursement:<br>OFFICE FURNITURE   |       | <input type="text"/> | Allocated Activity or Event Year-To-Date<br><input type="text"/> 143586.31   |  |
| Activity or Event Identifier:<br>Administrative  |       |                      | Date <input type="text"/> 05 / <input type="text"/> 31 / <input type="text"/> 2016   |  |
| FEDERAL SHARE  |       | +                    | NONFEDERAL SHARE   |  |
| <input type="text"/> 93.51   |       |                      | <input type="text"/> 240.47  |  |
|  |       | =                    | TOTAL AMOUNT   |  |
|  |       |                      | <input type="text"/> 333.98  |  |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|                             |   |                             |   |                             |
|-----------------------------|---|-----------------------------|---|-----------------------------|
| FEDERAL SHARE               | + | NONFEDERAL SHARE            | = | TOTAL AMOUNT                |
| <input type="text"/> 155.11 |   | <input type="text"/> 398.87 |   | <input type="text"/> 553.98 |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|                              |                               |                               |
|------------------------------|-------------------------------|-------------------------------|
| FEDERAL SHARE                | NONFEDERAL SHARE              | TOTAL AMOUNT                  |
| <input type="text"/> 7468.50 | <input type="text"/> 19204.72 | <input type="text"/> 26673.22 |